

STATE OF RHODE ISLAND
TOWN OF TIVERTON, RHODE ISLAND
343 HIGHLAND RD, TIVERTON RI
APPLICATION FOR ABSENTEE VOTING FOR
TIVERTON FINANCIAL TOWN REFERENDUM
May 21, 2022

AND/OR RUNOFF REFERENDUM ON JUNE 4, 2022 (IF NECESSARY)

CHECK ONE	
OR BOTH	

PLEASE SEND A BALLOT FOR THE MAY 21st **REFERENDUM**
PLEASE SEND A BALLOT FOR THE JUNE 4th RUNOFF (IF NECESSARY)

I MAY NOT BE ABLE TO VOTE AT MY POLLING PLACE ON THE DAY OF THE REFERENDUM.
IF THE BALLOT IS NOT BEING MAILED TO YOUR VOTER REGISTRATION ADDRESS (BOX A) PLEASE PROVIDE
THE ADDRESS WITHIN THE UNITED STATES WHERE YOU ARE TEMPORARILY RESIDING IN BOX B .
IF YOU REQUEST THAT YOUR BALLOT BE SENT TO YOUR LOCAL BOARD OF CANVASSERS, PLEASE INDICATE SO IN
BOX B.

**NOTE: THIS APPLICATION MUST BE RECEIVED BY THE
BOARD OF CANVASSERS IN TIVERTON NOT LATER
THAN 4:00 PM ON MAY 6, 2022**

FOR OFFICIAL USE ONLY

PRECINCT: _____
DATE: _____
ACCEPTED BY: _____

BOX A (PRINT OR TYPE)		
NAME OF VOTER		
VOTING ADDRESS		
CITY/TOWN	STATE	ZIP CODE
DATE OF BIRTH	PHONE NUMBER	

BOX B (PRINT OR TYPE)		
NAME OF VOTER		
ADDRESS		
ADDRESS		
CITY/TOWN	STATE	ZIP CODE

I DECLARE THAT ALL OF THE INFORMATION I HAVE PROVIDED ON THIS FORM IS TRUE AND CORRECT TO THE BEST
OF MY KNOWLEDGE. I FURTHER STATE THAT I AM NOT A QUALIFIED VOTER OF ANY OTHER CITY OR TOWN OR
STATE AND HAVE NOT CLAIMED AND DO NOT INTEND TO CLAIM THE RIGHT TO VOTE IN ANY OTHER CITY OR TOWN
OR STATE.

IF UNABLE TO SIGN NAME BECAUSE OF PHYSICAL INCAPACITY _____
OR OTHERWISE, APPLICANT SHALL MAKE HIS OR HER MARK "X" SIGNATURE IN FULL

PLEASE NOTE: A POWER OF ATTORNEY SIGNATURE IS NOT VALID IN RHODE ISLAND